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Bib Data Sheet

CONFIRMATION NO. 6658

SERIAL NUMBER 08/948,124	FILING OR 371(c) DATE 10/09/1997 RULE	CLASS 435	GROUP ART UNIT 1643	ATTORNEY DOCKET NO. DFCI-522A
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**** CONTINUING DATA *******

This application is a CON of 08/802,474 02/18/1997 ABN

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
** 02/12/1998

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

21005

REMA
4/25/01

TITLE

METHODS OF IDENTIFYING AGENTS WHICH ENHANCE CASPASE ACTIVITY

FILING FEE RECEIVED 851	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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